

**CitizenAudit.org**

Form **990-T****Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

OMB No 1545 0687

**2009**For calendar year 2009 or other tax year beginning \_\_\_\_\_, 2009,  
and ending \_\_\_\_\_, \_\_\_\_\_

▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service (77)Open to Public Inspection for  
501(c)(3) Organizations Only

<b>A</b> <input type="checkbox"/> Check box if address changed	<b>Print or Type</b>	POLYNESIAN CULTURAL CENTER 55-370 KAMEHAMEHA HIGHWAY LAIE, HI 96762	<b>D</b> Employer identification number (Employees' trust, see instructions for Block D) <b>99-0109908</b>
<b>B</b> Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)			<b>E</b> Unrelated business activity codes (See instructions for Block E) <b>711130</b>
<b>C</b> Book value of all assets at end of year <b>54,097,176.</b>			<b>F</b> Group exemption number (See instructions for Block F) ▶
<b>G</b> Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust			

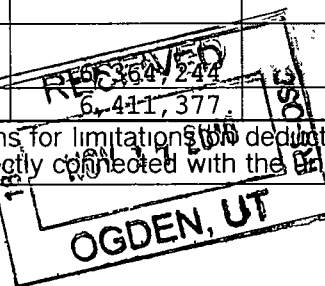
**H** Describe the organization's primary unrelated business activity▶ **THEATER REVENUE****I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ☐ Yes ☒ No  
If 'Yes,' enter the name and identifying number of the parent corporation ▶**J** The books are in care of ▶ **LARRY YUEN** Telephone number ▶ **(808) 293-3171**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales	77,640.			
b Less returns and allowances		1c 77,640.		
2 Cost of goods sold (Schedule A, line 7)		2 10,851.		
3 Gross profit Subtract line 2 from line 1c		3 66,789.		66,789.
4a Capital gain net income (attach Schedule D)		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b -19,656.		-19,656.
c Capital loss deduction for trusts		4c		
5 Income (loss) from partnerships and S corporations (attach statement)		5		
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Sch G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions, attach schedule)		12		
SEE STATEMENT 1		12 6,364,244.		6,364,244.
13 Total. Combine lines 3 through 12		13 6,411,377.	0.	6,411,377.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.)  
(Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14 242,719.
15 Salaries and wages	15 2,956,646.
16 Repairs and maintenance	16 118,313.
17 Bad debts	17 1,052.
18 Interest (attach schedule)	18
19 Taxes and licenses	19 584,708.
20 Charitable contributions (See instructions for limitation rules)	20
21 Depreciation (attach Form 4562)	21 749,270.
22 Less depreciation claimed on Schedule A and elsewhere on return	22a 749,270.
23 Depletion	23
24 Contributions to deferred compensation plans	24
25 Employee benefit programs	25 954,508.
26 Excess exempt expenses (Schedule I)	26
27 Excess readership costs (Schedule J)	27
28 Other deductions (attach schedule)	28 2,381,777.
29 Total deductions. Add lines 14 through 28	29 7,988,993.
30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13	30 -1,577,616.
31 Net operating loss deduction (limited to the amount on line 30) SEE STATEMENT 3	31
32 Unrelated business taxable income before specific deduction Subtract line 31 from line 30	32 -1,577,616.
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34 -1,577,616.

SCANNED DEC 8 2010



**Part III Tax Computation****35 Organizations Taxable as Corporations.** See instructions for tax computationControlled group members (sections 1561 and 1563) check here ☐. See instructions and**a** Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)

(1) \$ (2) \$ (3) \$

**b** Enter organization's share of (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

**c** Income tax on the amount on line 34

35c 0.

**36 Trusts Taxable at Trust Rates.** See instructions for tax computation Income tax on the amounton line 34 from ☐ Tax rate schedule or ☐ Schedule D (Form 1041)

36

**37 Proxy tax.** See instructions

37

**38 Alternative minimum tax**

38

**39 Total.** Add lines 37 and 38 to line 35c or 36, whichever applies

39 0.

**Part IV Tax and Payments****40a Foreign tax credit** (corporations attach Form 1118, trusts attach Form 1116)**b** Other credits (see instructions)**c** General business credit Attach Form 3800**d** Credit for prior year minimum tax (attach Form 8801 or 8827)**e Total credits.** Add lines 40a through 40d

40e 0.

**41 Subtract line 40e from line 39**

41 0.

**42 Other taxes.** Check if from ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866☐ Other (attach schedule)

42

**43 Total tax.** Add lines 41 and 42

43 0.

**44a Payments:** A 2008 overpayment credited to 2009**b** 2009 estimated tax payments**c** Tax deposited with Form 8868**d** Foreign organizations Tax paid or withheld at source (see instructions)**e** Backup withholding (see instructions)**f** Other credits and payments ☐ Form 2439☐ Form 4136 ☐ Other Total

44f

**45 Total payments.** Add lines 44a through 44f

45 0.

**46 Estimated tax penalty** (see instructions) Check if Form 2220 is attached ☐

46

**47 Tax due.** If line 45 is less than the total of lines 43 and 46, enter amount owed

47

**48 Overpayment.** If line 45 is larger than the total of lines 43 and 46, enter amount overpaid

48

**49 Enter the amount of line 48 you want Credited to 2010 estimated tax** ☐

Refunded 49

**Part V Statements Regarding Certain Activities and Other Information** (see instructions)**1** At any time during the 2009 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country hereYes No  
X**2** During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see the instructions for other forms the organization may have to fileYes No  
X**3** Enter the amount of tax-exempt interest received or accrued during the tax year \$ 0.**Schedule A – Cost of Goods Sold.** Enter method of inventory valuation ☒ AVERAGE COST**1** Inventory at beginning of year

1

**2** Purchases

2 10,851.

**3** Cost of labor

3

**4a** Additional section 263A costs (attach schedule)

4a

**b** Other costs (attach sch)

4b

**5 Total.** Add lines 1 through 4b

5 10,851.

**6** Inventory at end of year

6

**7 Cost of goods sold.** Subtract line 6 from line 5. Enter here and in Part I, line 2

7 10,851.

**8** Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?Yes No  
X

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

Date 11/12/10

Title VICE PRESIDENT

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer's Use Only

Preparer's signature

GARY J. MYERS

Date

11/01/10

Check if self employed ☐

Preparer's SSN or PTIN

P00104284

Firm's name (or yours if self-employed), address, and ZIP code

LAKE, HILL & MYERS  
6695 SOUTH 1300 EAST  
SALT LAKE CITY, UT 84121

EIN

87-0491579

Phone no

(801) 947-7500

**Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (column 3 plus column 4)
(1)				
(2)				
(3)				
(4)				
<b>Totals</b>	Enter here and on page 1, Part I, line 9, column (A)			Enter here and on page 1, Part I, line 9, column (B)

**Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute columns 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals</b>	Enter here and on page 1, Part I, line 10, column (A)	Enter here and on page 1, Part I, line 10, column (B)				Enter here and on page 1, Part II, line 26

**Schedule J – Advertising Income** (See instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (column 2 minus column 3) If a gain, compute columns 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
<b>Totals</b> (carry to Part II, line (5))						

**Part II Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (column 2 minus column 3) If a gain, compute columns 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
<b>(5) Totals from Part I</b>						
<b>Totals, Part II (lines 1-5)</b>	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)				Enter here and on page 1, Part II, line 27

**Schedule K – Compensation of Officers, Directors, and Trustees** (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
SEE STATEMENT 4		%	
		%	
		%	
		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14			242,719.

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

<b>24a</b> Do you have evidence to support the business/investment use claimed?					<input checked="" type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>	<b>24b</b> If 'Yes,' is the evidence written?		<input checked="" type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>(a)</b> Type of property (list vehicles first)	<b>(b)</b> Date placed in service	<b>(c)</b> Business/investment use percentage	<b>(d)</b> Cost or other basis	<b>(e)</b> Basis for depreciation (business/investment use only)	<b>(f)</b> Recovery period	<b>(g)</b> Method/Convention	<b>(h)</b> Depreciation deduction	<b>(i)</b> Elected section 179 cost		
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)								<b>25</b>		
<b>26</b> Property used more than 50% in a qualified business use										
SEE STMT 5	VARIOUS	100.0	150,664.	150,664.	5.0	200DB HY	685.			
<b>27</b> Property used 50% or less in a qualified business use										
								<b>28</b>	685.	
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1								<b>29</b>	0.	
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1								<b>29</b>	0.	

**Section B – Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	<b>(a)</b> Vehicle 1		<b>(b)</b> Vehicle 2		<b>(c)</b> Vehicle 3		<b>(d)</b> Vehicle 4		<b>(e)</b> Vehicle 5		<b>(f)</b> Vehicle 6	
<b>30</b> Total business/investment miles driven during the year ( <b>do not</b> include commuting miles)												
<b>31</b> Total commuting miles driven during the year												
<b>32</b> Total other personal (noncommuting) miles driven												
<b>33</b> Total miles driven during the year. Add lines 30 through 32												
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>34</b> Was the vehicle available for personal use during off-duty hours?												
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?												
<b>36</b> Is another vehicle available for personal use?												

**Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

	<b>Yes</b>	<b>No</b>
<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		
<b>Note:</b> If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.		

**Part VI Amortization**

<b>(a)</b> Description of costs	<b>(b)</b> Date amortization begins	<b>(c)</b> Amortizable amount	<b>(d)</b> Code section	<b>(e)</b> Amortization period or percentage	<b>(f)</b> Amortization for this year
<b>42</b> Amortization of costs that begins during your 2009 tax year (see instructions)					
<b>43</b> Amortization of costs that began before your 2009 tax year					<b>43</b>
<b>44</b> <b>Total.</b> Add amounts in column (f). See the instructions for where to report.					<b>44</b>

**STATEMENT 1  
FORM 990-T, PART I, LINE 12  
OTHER INCOME**

ADMISSIONS - NIGHT SHOW	\$ 8,047,315.
ADMISSIONS REFUNDS	-40,248.
HAWAII CAPITAL GOODS CREDIT	105,276.
SALES COMMISSIONS	-1,062,913.
SALES DISCOUNTS	-685,186.
<b>TOTAL</b>	<b>\$ 6,364,244.</b>

**STATEMENT 2  
FORM 990-T, PART II, LINE 28  
OTHER DEDUCTIONS**

ADVERTISING	\$ 199,507.
BANK FEES	71,569.
BUILDING MAINTENANCE	72,312.
CASH OVER/SHORT	2,271.
COMPLIMENTARY TICKET COSTS	19,023.
DATA PROCESSING	11,794.
GENERAL FUND	19,580.
GROUND RENT	231,241.
GROUNDS MAINTENANCE	54,071.
INSURANCE	52,308.
INVENTORY VARIANCE	-2,039.
LATE FEES	4.
LAUNDRY	15.
MEALS & ENTERTAINMENT	11,076.
OPERATING SUPPLIES	276,644.
OTHER RENT	267,255.
POSTAGE	2,975.
PROFESSIONAL DEVELOPMENT	13,327.
PROFESSIONAL FEES	121,325.
PROMOTIONAL PRINTING	62,646.
PUBLIC RELATIONS	30,122.
PURCHASE DISCOUNTS	-334.
RESEARCH & DEVELOPMENT	3,137.
RUBBISH HAULING	20,448.
SALES PROMOTIONS	4,273.
SPECIAL EVENTS	9,070.
SUBSCRIPTIONS & DUES	25,578.
TELEPHONE EXPENSE	23,365.
TICKET AMORTIZATION	64,683.
TRADE SHOWS	2,395.
TRAVEL	25,980.
UNIFORMS	4,440.
UTILITIES	658,840.
VEHICLES EXPENSE	22,876.
<b>TOTAL</b>	<b>\$ 2,381,777.</b>

## POLYNESIAN CULTURAL CENTER

99-0109908

**STATEMENT 5**  
**FORM 4562, PART V, LINE 26**  
**DEPRECIATION**

Type of Property	In-Service Date	Business Use %	Cost	% to UBI	Basis for Depr.	Depr. Method	Depr. Expense
Chevy 1-ton flatbed	Jan-98	100%	25,335	18.90%	4,788	SL-5 yr	-
Ford E-350 Van	Mar-98	100%	32,120	18.90%	6,071	"	-
Metro Tram	Jan-00	100%	55,175	18.90%	10,428	"	-
Metro Tram	Jan-00	100%	55,177	18.90%	10,428	"	-
Honda Van	Jul-00	100%	27,849	18.90%	5,263	"	-
Ford E-350 Van	Jun-01	100%	27,132	18.90%	5,128	"	-
Toyota Avalon	Jul-01	100%	27,310	18.90%	5,162	"	-
Gem electric car (C63)	Dec-01	100%	10,300	18.90%	1,947	"	-
Gem electric car (C64)	Dec-01	100%	10,300	18.90%	1,947	"	-
Gem electric car (C65)	Dec-01	100%	10,300	18.90%	1,947	"	-
Gem electric car (C66)	Dec-01	100%	10,300	18.90%	1,947	"	-
Ford Ranger truck	Apr-02	100%	13,298	18.90%	2,513	"	-
Ford Ranger truck	Apr-02	100%	13,298	18.90%	2,513	"	-
Ford Ranger truck	Apr-02	100%	13,298	18.90%	2,513	"	-
Ford Club Wagon	Aug-02	100%	21,299	18.90%	4,026	"	-
Honda CRV	May-03	100%	20,130	18.90%	3,805	"	-
Le Sienna Van	Jun-03	100%	27,530	18.90%	5,203	"	-
Ford 4x2 Truck F350	Jul-03	100%	36,108	18.90%	6,824	"	-
Le Sienna Van	Aug-03	100%	29,516	18.90%	5,578	"	-
Supreme 5000 Series Tram	Nov-03	100%	110,365	18.90%	20,859	"	-
2003 FORD COMMERCIAL O	Feb-04	100%	39,206	18.90%	7,410	"	-
2004 FORD RANGER XL PIC	Mar-04	100%	13,953	18.90%	2,637	"	-
2004 HONDA CRV w/5 DOO	Mar-04	100%	20,260	18.90%	3,829	"	-
2000 FORD FOCUS - MISSIO	Mar-04	100%	4,725	18.90%	893	"	-
2004 FORD WHITE F250 TRU	Apr-04	100%	22,565	18.90%	4,265	"	-
RICH CROWN STANDUP RID	Sep-04	100%	22,346	18.90%	4,223	"	-
2004 CHEVY ASTRO VAN, 8	Dec-04	100%	23,200	18.90%	4,385	"	-
2004 WHITE FORD PICKUP	Dec-04	100%	15,646	18.90%	2,957	"	-
2004 WHITE FORD PICKUP	Dec-04	100%	15,621	18.90%	2,952	"	-
V80 - 2006 Nissan Sentra	Apr-06	100%	14,500	18.90%	2,741	"	228
V81 - 2006 Nissan Sentra	Apr-06	100%	14,500	18.90%	2,741	"	228
V82 - 2006 Nissan Sentra	Apr-06	100%	14,500	18.90%	2,741	"	228
			<u>797,162</u>		<u>150,664</u>		<u>685</u>

**STATEMENT 3**  
**FORM 990-T, PART II, LINE 31**  
**NET OPERATING LOSS DEDUCTION**

LOSS YEAR ENDING		ORIGINAL LOSS	LOSS PREVIOUSLY USED		LOSS AVAILABLE
12/31/94	\$	126,445.	\$	0.	\$ 126,445.
12/31/00		395,025.		0.	395,025.
12/31/01		665,691.		0.	665,691.
12/31/02		45,405.		0.	45,405.
12/31/03		581,397.		0.	581,397.
12/31/04		90,909.		0.	90,909.
12/31/05		528,908.		0.	528,908.
NET OPERATING LOSS AVAILABLE					\$ 2,433,780.
TAXABLE INCOME					\$ -1,577,616.
NET OPERATING LOSS DEDUCTION (LIMITED TO TAXABLE INCOME)					\$ 0.

**STATEMENT 4**  
**FORM 990-T, SCHEDULE K**  
**COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES**

NAME	TITLE	% OF TIME DEVOTED	UNRELATED BUSINESS COMPENSATION
VON ORGILL	PRESIDENT	25	\$ 70,355.
M. GREG GOLLAHER	VP OF FINANCE	20	15,799.
DAVID RALPH	VP OF FINANCE	20	30,314.
P. ALFRED GRACE	VP SALES	20	41,689.
JOHN MUAINA	VP HUMAN RES.	20	25,095.
LOGOITINO APELU	VP OPERATIONS	30	59,467.
TOTAL			\$ 242,719.





Form **4562**Department of the Treasury  
Internal Revenue Service (99)**Depreciation and Amortization**  
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

**2009**Attachment  
Sequence No **67**

Name(s) shown on return

POLYNESIAN CULTURAL CENTER

Identifying number

99-0109908

Business or activity to which this form relates

FORM 990-T

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount See the instructions for a higher limit for certain businesses	1	\$250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000.
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)** (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.)** (See instructions)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	544,618.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B – Assets Placed in Service During 2009 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property		15,174.	3	MQ	S/L	2,138.
b 5-year property		39,639.	5	MQ	S/L	7,928.
c 7-year property		1,808,987.	7	MQ	S/L	189,690.
d 10-year property						
e 15-year property		32,623.	15	MQ	S/L	181.
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property	VARIOUS	2,160,336.	39 yrs	MM	S/L	4,030.
				MM	S/L	

**Section C – Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

**Part IV Summary** (See instructions)

21	Listed property Enter amount from line 28	21	685.
22	Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations — see instructions	22	749,270.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

BAA For Paperwork Reduction Act Notice, see separate instructions.

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Form **4562** (2009)

**Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)** (see instructions)

1 Description of property		
(1)		
(2)		
(3)		
(4)		
2 Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	Total	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)		

**Schedule E – Unrelated Debt-Financed Income** (see instructions)

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach sch)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
<b>Totals</b>				
Total dividends-received deductions included in column 8				

**Schedule F – Interest, Annuities, Royalties, and Rents from Controlled Organizations** (see instructions)

1 Name of Controlled Organization	2 Employer Identification Number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7 Taxable Income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on page 1, part I, line 8, column (B)	
<b>Totals</b>					